

Application Data Sheet

Application Information

Application number:: Unassigned
Filing Date:: 11/28/01
Application Type:: Regular
Subject Matter:: Utility
Title:: ENDOSCOPIC BEATING-HEART STABILIZER
AND VESSEL OCCLUSION FASTENER
Attorney Docket Number:: 017516-002580US
Request for Early Publication:: No
Request for Non-Publication:: No
Total Drawing Sheets:: 45
Small Entity?: Yes
Petition included?: No
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: CHRISTOPHER
Middle Name:: A.
Family Name:: JULIAN
City of Residence:: Los Gatos
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 546 Woodland Ridge
City of Mailing Address:: Los Gatos
State or Province of mailing address:: CA
Country of mailing address:: USA

Postal or Zip Code of mailing address:: 95033

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: MICHAEL

Family Name:: IKEDA

City of Residence:: San Jose

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 4930 Elmwood Drive

City of Mailing Address:: San Jose

State or Province of mailing address:: CA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 95130

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: ANDRIS

Middle Name:: D.

Family Name:: RAMANS

City of Residence:: Mountain View

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 585 Tahoe Terrace

City of Mailing Address:: Mountain View

State or Province of mailing address:: CA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 94041

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: DEAN
Middle Name:: F.
Family Name:: HOORNAERT
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1945 Latham Street, #11
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: MARGARET
Middle Name:: M.
Family Name:: ISAAC
City of Residence:: Redwood City
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2101 Jefferson Avenue
City of Mailing Address:: Redwood City
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94062

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|------------------------|----------------------|----------------------|
| This application | Claims priority from:: | 60/253,484 | 11/28/2000 |
| | claims priority from:: | 60/285,641 | 04/19/2001 |
| | claims priority from:: | 60/290,556 | 05/10/2001 |
| | claims benefit from:: | 09/436,524 | 11/09/1999 |

Assignee Information

| | |
|---|----------------------------|
| Assignee Name:: | Intuitive Surgical, Inc. |
| Street of mailing address:: | 1340 West Middlefield Road |
| City of mailing address:: | Mountain View |
| State or Province of mailing address:: | CA |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing address:: | 94043 |

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